

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">101759266</div>	Filing Date	
							Applicant(s)		
* May be used for additional claims or amendments									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep
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Total Indep	1								
Total Depend	13								
Total Claims	14								
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Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	1					
Total Depend	13					
Total Claims	14					

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